

GOOD HEALTH IS GOOD BUSINESS

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(GREETINGS TO HOSTS, GUESTS)

I'M DELIGHTED TO JOIN YOU THIS EVENING. I FIND THIS SETTING TO BE SO CONGENIAL. I'M BACK IN MY HOME STATE OF PENNSYLVANIA. I AM JOINED BY MANY FRIENDS AND COLLEAGUES FROM THE MARCH OF DIMES. MY OTHER HOST IS A FOUNDATION SPONSORED BY AN ENLIGHTENED LEADER OF THE FOOD INDUSTRY. .AND I'VE BEEN ASKED TO TALK ABOUT THE ROLE OF PREVENTIVE HEALTH IN OUR LIVES AND IN THE LIVES OF THE PEOPLE WE WANT TO SERVE. IT'S JUST AN IDEAL EVENT FOR THIS SURGEON GENERAL. LET ME THANK YOU AGAIN FOR THE INVITATION.

BUT BEFORE WE BOTH GET CARRIED AWAY, I WANT TO WARN YOU THAT MY MESSAGE TO YOU THIS EVENING IS NOT GOING TO BE EASY FOR EITHER OF US. WHEN IT COMES TO WORKING OUT A PUBLIC HEALTH STRATEGY FOR AMERICA IN THE COMING DECADES, WE ARE JUST AT THE TAKE-OFF POINT. IT IS FAR TOO EARLY FOR SELF-CONGRATULATIONS. WE HAVE A LOT OF WORK TO DO...GOOD WORK...COMPLEX WORK...BUT VERY REWARDING AND LIFE-SAVING WORK.

FIRST OF ALL, I WANT TO URGE YOU TO DO TWO THINGS, AS YOU PROCEED WITH YOUR PLANS AND YOUR COMMITMENTS FOR IMPROVED HEALTH EDUCATION

PROGRAMS FOR INDUSTRIAL EMPLOYEES. I WANT YOU TO THINK ABOUT THOSE EMPLOYEES AS BEING COMPLETE PEOPLE...PEOPLE WHO GO HOME TO A VARIETY OF ENVIRONMENTS AFTER WORK...PEOPLE WHO HAVE FAMILIES AND FRIENDS WITH A RANGE OF HEALTH AWARENESS, FROM "VERY GOOD" DOWN TO "TERRIBLE"... PEOPLE WHO HAVE HOBBIES, SECOND JOBS, NIGHT-SCHOOL COURSES, OR WHO PLAY ON LOCAL SPORTS TEAMS. THEY DO NOT SUDDENLY COME TO LIFE AT THE PLANT GATE, NOR DO THEY TURN TO SHADOW AND SMOKE AT THE SHIFT WHISTLE.

I MAKE THAT POINT BECAUSE ONE OF THE TOUGHEST CRITICISMS THAT THE PUBLIC HAS MADE ABOUT THE MEDICAL PROFESSION AND ABOUT PEOPLE IN HEALTH CARE GENERALLY IS THAT WE "DON'T UNDERSTAND REAL LIFE AND WE DON'T CARE WHAT HAPPENS WHEN YOU LEAVE THE OFFICE OR THE HOSPITAL." I HAVE ALWAYS WORRIED ABOUT THAT CRITICISM BECAUSE, UNFORTUNATELY, FOR MANY PEOPLE IT HAS BEEN TRUE. WE NEED TO BE VERY SENSITIVE TO OUR OWN TENDENCIES TO BE PAROCHIAL, TO HAVE A KIND OF "TUNNEL VISION" AS WE GO ABOUT OUR IMPORTANT BUSINESS.

I FEEL COMFORTABLE SOUNDING THIS WARNING BEFORE THIS AUDIENCE. CLEARLY THE MARCH OF DIMES AND THE HEINZ FOUNDATION SEES THE INDUSTRIAL EMPLOYEE AS SOMETHING MORE THAN "JUST ANOTHER EMPLOYEE."

LET'S NOT FORGET THIS ACCEPTANCE OF THE "COMPLETENESS" OF THE PEOPLE WHO NEED OUR HELP AND OUR GUIDANCE. IN OUR ZEAL TO DO A CRACKERJACK JOB OF IN-PLANT HEALTH CARE, LET'S NOT TAKE AWAY FROM OUR FELLOW EMPLOYEES THE VERY HUMANITY THAT OUR HOSTS THIS EVENING RECOGNIZE AND TRULY CARE ABOUT.

THE OTHER WARNING I HAVE IS THIS: FOR EVERY ONE OF THOSE EMPLOYEES WHOM YOU HELP, THERE MAY BE ONE TWO OR A HALF DOZEN WHO WILL BE AFFECTED IN TURN, THE CHILDREN BORN OR YET TO BE BORN TO THAT EMPLOYEE. THE AMAZING THING ABOUT LIFE IS THAT IT IS CONTINUOUS, IT IS PASSED DOWN AND PASSED ON, IT IS TOUCHED AND USED AND SHAPED AND THEN HANDED TO THE NEXT PERSON IN LINE. PARENTS DO THIS. AND JUST ABOUT EVERYBODY HAS THE POTENTIAL FOR PARENTHOOD.

SO WE'RE NOT TALKING THIS EVENING ABOUT ANY IDLE OR MODERATELY INTERESTING ACTIVITY. WE'RE TALKING ABOUT A JOB THAT WE CAN DO THAT CAN ENHANCE THE LIVES NOT ONLY OF THE PEOPLE WE KNOW -- RIGHT NOW -- AND CARE ABOUT, BUT ALSO OF PEOPLE WHO WILL COME ALONG LATER WHOM WE WILL NEVER KNOW, WHO WILL NEVER BE ABLE TO THANK US FOR PROTECTING A SPECIAL PART OF THEIR INHERITANCE: THEIR GOOD HEALTH.

GRANTED, I'M PROBABLY MORE SENTIVE TO THIS PARTICULAR ASPECT OF HEALTH AND MEDICAL CARE THAN MOST. I WAS FOR 35 YEARS A PEDIATRIC SURGEON ON THE OTHER SIDE OF THE COMMONWEALTH, AT CHILDREN'S HOSPITAL OF PHILADELPHIA, AFFECTIONATELY KNOWN BY ITS STAFF AS "CHOP"! AND HARDLY A WEEK GOES BY THAT SOME YOUNG ADULT WILL NOT WALK UP TO ME AT A LUNCHEON OR IN A PUBLIC MEETING OR JUST ON THE STREET AND SAY, "DR. KOOP? REMEMBER ME? WHEN I WAS THREE HOURS OLD, YOU OPENED UP MY ESOPHAGUS SO I COULD EAT."

THESE FORMER PATIENTS ARE NOW FULLY GROWN AND SOMETIMES THEY HAVE THEIR OWN LITTLE CHILDREN HANGING ON THE HEM OF THEIR SKIRTS OR PEEKING AROUND FROM BEHIND A TROUSER LEG. IT'S A VERY REWARDING FEELING, I CAN ASSURE YOU. BUT I WILL ALSO ASSURE YOU THAT AT NO TIME WHILE PERFORMING SURGERY DID I EVER LOOK DOWN AT MY TINY PATIENT AND SAY, "NOW WHEN YOU GET OLDER, BE SURE TO LOOK ME UP. AND BRING YOUR FAMILY, TOO." IT NEVER ENTERED MY MIND. BUT WHEN I LOOK DOWN NOW AT THOSE CHILDREN OF MY FORMER PATIENTS, I CAN'T HELP BUT FEEL VERY GOOD ABOUT THE FACT THAT I MAY HAVE HAD SOMETHING TO DO WITH THEIR BEING THERE AT ALL.

IN A FEW MOMENTS, I WANT TO SPEAK MORE TO THIS POINT BECAUSE, AS PROMOTERS OF GOOD HEALTH, YOU'VE GOT TO BE THINKING ABOUT SOME THINGS THAT ARE SPECIFICALLY DIRECTED TO THE NEXT -- AND SUBSEQUENT -- GENERATIONS. BUT FIRST I'D LIKE TO SET THE CONTEXT OF OUR WORK BY SKETCHING IN A LITTLE PROFILE OF AMERICA -- TODAY AND TOMORROW.

TO BEGIN WITH, THE STRUCTURE OF OUR POPULATION IS CHANGING QUITE DRAMATICALLY. AS A RESULT, OUR COMMUNITIES, OUR NEIGHBORHOODS, AND OUR PLACES OF WORK WILL BE CHANGING AS WELL. THIS IS A MAJOR CHALLENGE TO ANYONE IN HEALTH CARE. THE OLD WAYS OF DOING THINGS -- NO MATTER HOW SUCCESSFUL THEY'VE BEEN -- PROBABLY WILL NOT BE ADEQUATE FOR THE FUTURE.

WE'VE ALL READ POPULAR MAGAZINE ARTICLES ABOUT THE "GRAYING OF AMERICA." AND THEY'RE ALL TRUE. THE POST-WORLD WAR II "BABY BOOM" GENERATION IS NOW OUR ADULT WORK-FORCE. THEY ARE BETWEEN 20 AND 32 YEARS OF AGE AND THEY RUN OUR FACTORIES AND FARMS AND DOMINATE OUR POLITICAL LIFE. THEY ARE THE NEW LEADERS IN VOLUNTARY GROUPS LIKE THE MARCH OF DIMES AND IN COMPANIES LIKE H.J. HEINZ. THEY ARE THE CORE OF OUR NATIONAL VITALITY.

THIS GENERATION IS LIVING BETTER AND WILL BE LIVING LONGER AS THE BENEFICIARY OF ABOUT 30 YEARS OF RESEARCH ON THE DETECTION AND TREATMENT OF SOCIETY'S MAJOR KILLERS:

- * FIRST ON ANYONE'S LIST IS HEART DISEASE...SINCE 1950 WE'VE BEEN ABLE TO REDUCE THE MORTALITY RATE FROM THIS DISEASE BY OVER 30 PERCENT, WHICH MEANS REDUCING THE NUMBER OF PREMATURE DEATHS AMONG THAT "BABY BOOM" GENERATION.
- * NEXT IS CANCER...MANKIND'S MOST PERSISTENT SCOURGE, PRODUCING THE SECOND HIGHEST NUMBER OF PREMATURE DEATHS IN OUR SOCIETY. WE HAVEN'T SOLVED THE PUZZLE OF CANCER, BUT WE HAVE NEVERTHELESS BEEN ABLE TO DROP THE DEATH RATE FROM CANCER BY 33 PERCENT AMONG PERSONS UNDER THE AGE OF 45 -- THE "BABY BOOM" GENERATION AGAIN.
- * AND THEN THERE IS STROKE...A COMPLEX DISEASE THAT IS SO CLOSELY COUPLED TO AN INDIVIDUAL'S PHYSICAL, MENTAL, AND EMOTIONAL HEALTH. BUT IN THE PAST 30 YEARS WE WERE ABLE TO REDUCE THE DEATH RATE FROM STROKE BY 49 PERCENT. THE FIRST GROUP OF AMERICANS TO BENEFIT FROM THIS EXTRAORDINARY ADVANCE IN MEDICINE HAS BEEN THAT SAME "BABY BOOM" GENERATION.

ONE RESULT OF ALL THIS PROGRESS APPEARS TO BE A FEW MORE YEARS OF LIFE FOR THE PEOPLE IN THIS GENERATION. THEREFORE, WE CAN EXPECT THAT SHORTLY AFTER THE TURN OF THE CENTURY -- AROUND THE YEAR 2010 -- APPROXIMATELY 1 IN EVERY 5 AMERICANS WILL BE A SENIOR CITIZEN. THERE WILL BE SOMETHING LIKE 50 MILLION PERSONS OVER THE AGE OF 65, COMPARED TO ABOUT 25 MILLION IN THAT AGE GROUP TODAY. THE MEDIAN AGE IN AMERICA TODAY IS 28 YEARS AND 10 MONTHS. IN THE YEAR 2010 THE MEDIAN AGE WILL BE 35 YEARS AND 7 MONTHS.

BUT THERE'S ANOTHER SIDE TO THIS STORY. THIS AGING "BABY BOOM" GENERATION IS HAVING BABIES OF ITS OWN. IN FACT, OUR SOCIETY IS EXPERIENCING WHAT IS CALLED AN "ECHO EFFECT." WHILE THE FERTILITY RATE AMONG "BABY BOOM" WOMEN IS CLOSE TO HALF THE RATE OF THEIR MOTHERS, THERE ARE SO MANY MORE OF THEM TODAY THAT THE TOTAL NUMBER OF LIVE BIRTHS REMAINS VERY IMPRESSIVE: THE NUMBER OF LIVE BIRTHS IN 1980 WAS ONLY 20 PERCENT LESS THAN THE NUMBER OF BIRTHS IN THE PEAK "BABY BOOM" YEAR OF 1957. IF THE FERTILITY RATE WERE THE SAME TODAY AS IT WAS 25 YEARS AGO, THERE WOULD BE SOMETHING LIKE 7 MILLION BABIES BORN IN AMERICA THIS YEAR, INSTEAD OF THE ANTICIPATED 3.6 MILLION.

AND MORE OF TODAY'S BABIES ARE SURVIVING. IN 1957 THIS COUNTRY HAD A RATE OF 26 INFANT DEATHS AMONG EVERY 1,000 LIVE BIRTHS. THE LATEST ESTIMATE WE HAVE TODAY IS AN INFANT MORTALITY RATE OF 11.1 FOR EVERY 1,000 LIVE BIRTHS. SO IN JUST ONE GENERATION, WE REDUCED THE INFANT MORTALITY RATE BY MORE THAN HALF. DURING THIS SAME PERIOD WE ALSO CUT THE DEATH RATE FOR CHILDREN AGES 1 THROUGH 14 BY NEARLY HALF. THERE IS ONLY ONE CONCLUSION TO DRAW FROM ALL THIS: WE MAY HAVE ANOTHER "BABY BOOM" ON THE WAY.

A COUPLE OF THINGS COME THROUGH TO YOU, IF YOU PONDER THIS INFORMATION FOR ANY LENGTH OF TIME. IF WE'RE HAVING TROUBLE KEEPING UP WITH THE COST OF MEDICAL CARE FOR OUR CURRENT ADULT AND OLDER POPULATION, WHAT ON EARTH WILL WE DO WHEN 20 PERCENT OF THE COUNTRY IS OVER 65? ALSO, WILL IT BE POSSIBLE TO MAINTAIN OR EVEN IMPROVE UPON OUR RECORD IN FIGHTING DISEASE AND DISABILITY, OR WILL WE BE FORCED TO SLIP BACK?

THESE AREN'T IDLE QUESTIONS. THEY DEMAND ANSWERS THAT FIT INTO SOME NEW AND SUBSTANTIAL FRAMEWORK OF HEALTH AND MEDICAL CARE. THE TRADITIONAL AND VERY COSTLY WAY OF DOING THINGS -- THAT IS, CURING OR REPAIRING PEOPLE AFTER THEY'VE COME DOWN WITH SOMETHING -- IS JUST NOT ADEQUATE TO THE NEEDS OF TOMORROW.

THOSE ARE AMONG THE REASONS FOR THE INTEREST IN HEALTH PROMOTION AND THE PREVENTION OF DISEASE AND DISABILITY. THIS KIND OF APPROACH TO HEALTH CARE -- THE APPROACH THAT YOU INTEND TO BRING ONTO THE WORKSITE -- EMPHASIZES SELF-CARE AS A WAY TO AVERT "THE FOUR D's": DISCOMFORT, DISEASE, DISABILITY, AND DEATH. IT IS MUCH CHEAPER FOR THE INDIVIDUAL AS WELL AS FOR SOCIETY. AND IT TENDS TO PRODUCE POSITIVE, LONG-TERM, GENERATIONAL EFFECTS.

WHILE THIS ADMINISTRATION HAS MADE PREVENTION AND HEALTH PROMOTION THE KEYSTONE OF NATIONAL HEALTH POLICY, I MUST BE CANDID AND TELL YOU THAT THERE IS NOTHING REALLY NEW ABOUT IT. YOU CAN GO BACK TO THE DEDUCTIVE GENIUS OF DR. JOHN SNOW DURING THE GREAT LONDON CHOLERA EPIDEMIC OF 1854. DR. SNOW TOOK THE HANDLE OFF THE COMMUNITY WATER PUMP AT BROAD STREET AND -- WITH THAT SIMPLE PREVENTIVE MEASURE -- INTERRUPTED THE TRANSMISSION OF CHOLERA AMONG THE LONDON POOR.

SINCE THEN, WE'VE ADVANCED THE NOTION OF PREVENTION. STILL, WE OUGHT NOT TO FORGET THE HOMELY EXAMPLE OF DR. SNOW OR THE BLUNT OPINION OF THE PHILOSOPHER, JEAN-JACQUES ROUSSEAU, WHO SAID THAT "HYGIENE WAS LESS A SCIENCE THAN A VIRTUE." AND I SUPPOSE HE'S RIGHT.

BUT WHETHER YOU SUBSCRIBE TO "SCIENCE" OR TO "VIRTUE," I BELIEVE YOU'LL BE INTERESTED IN TWO BASIC DOCUMENTS PRODUCED BY THE U.S. PUBLIC HEALTH SERVICE. THE FIRST IS TITLED HEALTHY PEOPLE, THE SURGEON GENERAL'S REPORT ON HEALTH PROMOTION AND DISEASE PREVENTION, AND THE SECOND IS CALLED OBJECTIVES FOR THE NATION, AND IT SPELS OUT IN SOME DETAIL HOW WE HOPE TO ACHIEVE BETTER HEALTH STATUS AND A REDUCED LEVEL OF DISEASE AND DISABILITY IN OUR SOCIETY. THESE TWO SLIM VOLUMES WERE PREPARED WITH THE HELP OF SOME 2,000 NON-GOVERNMENTAL EXPERTS ACROSS A BROAD SPECTRUM OF DISCIPLINES. I STRONGLY COMMEND THEM TO YOU.

IN THE OBJECTIVES, FOR EXAMPLE, WE TAKE A LOOK AT 15 DIFFERENT PRIORITY AREAS SUCH AS ACCIDENT PREVENTION, NUTRITION, TOXIC AGENT AND RADIATION CONTROL, DRUG ABUSE, AND SO ON. THIS INFORMATION IS THEN TRANSLATED INTO GOALS THAT WE BELIEVE CAN BE ACHIEVED BY THE YEAR 1990. PERSONALLY, I THINK IT IS ONE OF THE MOST AMBITIOUS PUBLIC HEALTH PROGRAMS IN RECENT MEMORY.

WE HAVE ALREADY STARTED ALONG THE ROAD LEADING TO THOSE OBJECTIVES, IN PARTNERSHIP WITH STATE AND LOCAL HEALTH AGENCIES, PRIVATE PROFESSIONAL AND VOLUNTARY ASSOCIATIONS, AND WITH THE ACTIVE SUPPORT OF

BUSINESS AND INDUSTRY. IN ADDITION, SECRETARY SCHWEIKER HAS ESTABLISHED A DEPARTMENT-WIDE "HEALTH PROMOTION STRATEGY" WITH SPECIFIC TASKS FOR THE SOCIAL SECURITY ADMINISTRATION, MEDICARE AND MEDICAID, AND, OF COURSE, THE PUBLIC HEALTH SERVICE.

THE KINDS OF OBJECTIVES WE HAVE IN MIND ARE FAIRLY SPECIFIC AND MEASURABLE. FOR EXAMPLE, WE LOOK FORWARD TO ACHIEVING...

- * FULL IMMUNIZATION FOR AT LEAST 95 PERCENT OF ALL SCHOOL-AGE CHILDREN BY THE YEAR 1990...
- * A DECLINE IN THE INFANT MORTALITY RATE FROM THE PRESENT 11.1 DEATHS PER 1,000 LIVE BIRTHS DOWN TO 9 DEATHS PER 1,000...
- * LONG-TERM BLOOD PRESSURE CONTROL FOR AT LEAST 60 PERCENT OF THE POPULATION WITH DEFINITE HYPERTENSION, THAT IS, WITH A READING OF 160 OVER 95 OR HIGHER...
- * A DROP IN ADULT CIGARETTE SMOKING DOWN TO BELOW 1 PERSON IN 4; IT IS NOW 1 IN 3.

* AND A REDUCTION IN THE MOTOR VEHICLE FATALITY RATE FROM ITS PRESENT LEVEL OF ABOUT 24 PER 100,000 POPULATION TO A LEVEL OF 18 OR EVEN LOWER.

THESE ARE NOT ALL OF THEM. THERE ARE MULTIPLE OBJECTIVES IN 15 DIFFERENT HEALTH AREAS. BUT I HOPE YOU ARE STIMULATED BY MY FEW REMARKS TO READ BOTH REPORTS, SINCE THEY PROVIDE ALL OF US WITH A KIND OF ROADMAP OF WHERE WE'RE HEADED AND HOW WE HOPE TO GET THERE.

THE BASIC ROUTE WE NEED TO FOLLOW TAKES US DEEP INTO THE BEHAVIORAL PATTERNS OF OUR FELLOW CITIZENS. NOT JUST THEIR BEHAVIOR ON THE JOB, BUT THEIR TOTAL BEHAVIOR ON AND OFF THE JOB. I THINK THIS WAS BEST STATED BY DR. EDWARD N. BRANDT, JR., IN A RECENT ADDRESS BEFORE AN ASSOCIATION OF HEALTH PROFESSIONALS. HE SAID THE FOLLOWING:

"...WE MUST NOT LET THE INDIVIDUAL OFF THE HOOK. THE GREATEST ADVANCES FOR IMPROVING THE QUALITY OF LIFE AND LOWERING HEALTH CARE COSTS MUST COME FROM EACH PERSONS'S ADOPTING WHAT I CHOOSE TO CALL THE 'PREVENTION ETHIC.' IN OTHER WORDS, EVERY AMERICAN MUST BE WILLING TO DO THOSE THINGS THAT ARE NECESSARY FOR HIS OR HER

GOOD HEALTH. AND HEALTH PROFESSIONALS NEED TO ACCEPT THE CHALLENGE TO ASSIST PATIENTS IN UNDERSTANDING THE IMPORTANCE OF PREVENTION AND IN TAKING ACTIONS THAT PROMOTE GOOD HEALTH.

"SOME OF THOSE ACTIONS INCLUDE...

- ...QUITTING THE SMOKING OF CIGARETTES
- ...AVOIDING THE ABUSE OF ALCOHOL
- ...LEARNING TO COPE WITH STRESS
- ...EATING A PROPER DIET
- ...AND DEVELOPING GOOD EXERCISE HABITS."

DR. BRANDT WENT ON TO SAY THAT HE WAS PROUD OF THE FACT THAT "WE CAN TREAT MYOCARDIAL INFARCTIONS EFFECTIVELY IN A 45-YEAR-OLD MAN. BUT WHAT DO WE DO TO HELP HIM AVOID A SECOND ONE? WE HAVE ENOUGH INFORMATION RIGHT NOW TO PROVIDE HIM WITH USEFUL INFORMATION. BUT THE ULTIMATE CHALLENGE IS TO PREVENT THE FIRST ONE."

I AGREE WITH THAT SENTIMENT COMPLETELY, AND I HOPE YOU DO, TOO. BUT IF YOU DO, AND YOU FOLLOW IT TO A LOGICAL CONCLUSION, I THINK YOU WILL DISCOVER THAT IT LEADS US TO A HEIGHTENED AWARENESS OF THE

IMPORTANCE OF GOOD MATERNAL AND CHILD HEALTH PRACTICES. IF WE REALLY WANT TO PREVENT THE FIRST HEART ATTACK FROM EVER OCCURRING, THE BEST THING WE CAN DO IS TO MAKE SURE THAT THE ADULT HAS HAD A HEALTHY CHILDHOOD, HAD A NORMAL BIRTH, AND -- EVEN BEFORE THAT -- WAS NOURISHED IN UTERO BY A HEALTHY MOTHER.

THIS IS NOT JUST THEORY. WE HAVE A GOOD ILLUSTRATION OF JUST HOW THIS CAN WORK IN A PROGRAM BEGUN LAST YEAR. IT'S CALLED "HEALTHY MOTHERS, HEALTHY BABIES." THIS IMPORTANT NATIONAL PUBLIC INFORMATION AND EDUCATION CAMPAIGN IS BEING CARRIED OUT BY A GROUP CALLED, APPROPRIATELY ENOUGH, THE "HEALTHY MOTHERS, HEALTHY BABIES COALITION." THIS COALITION IS COMPRISED OF OVER 50 PROFESSIONAL, VOLUNTARY, AND GOVERNMENT ORGANIZATIONS WITH A COMMON INTEREST IN PERINATAL MATERNAL AND INFANT HEALTH.

I'M SURE MANY OF YOU HERE THIS EVENING ARE AWARE OF THIS COALITION, SINCE THE MARCH OF DIMES WAS AMONG THE ORIGINAL SIX GROUPS THAT FORMED THE STEERING COMMITTEE FOR THIS IMPORTANT NATIONAL EFFORT. THAT STEERING COMMITTEE HAS SINCE GROWN TO 27 MEMBERS, BUT

THE MARCH OF DIMES-BIRTH DEFECTS FOUNDATION STILL CARRIES ON AS THE LEAD AGENCY. OTHER EARLY MEMBERS, BY THE WAY, WERE THE AMERICAN ACADEMY OF PEDIATRICS, THE AMERICAN NURSES ASSOCIATION, THE AMERICAN COLLEGE OF OBSTETRICIANS AND GYNECOLOGISTS, THE PARENT TEACHERS ASSOCIATION, AND OUR OWN U.S. PUBLIC HEALTH SERVICE. ALL ARE STILL DEEPLY INVOLVED IN THE PROGRAM.

I MIGHT ADD THAT THE VERY ABLE DIRECTOR OF EDUCATION FOR THE MARCH OF DIMES, DR. MARY HUGHES, WAS INSTRUMENTAL IN DEVELOPING AND DISTRIBUTING A SERIES OF RADIO SPOT ANNOUNCEMENTS THIS YEAR, IN WHICH I WAS VERY PLEASED TO TAKE PART.

WHAT DOES THIS PROGRAM ATTEMPT TO DO? ITS PURPOSES ARE SIMPLE ENOUGH TO STATE, BUT SO VERY COMPLEX TO ACHIEVE:

- * TO PROVIDE INFORMATION THAT PROMOTES HEALTHY BEHAVIOR IN PREGNANT WOMEN AND WOMEN PLANNING A PREGNANCY...
- * TO INCREASE UNDERSTANDING AMONG THESE WOMEN OF CERTAIN HEALTH RISKS AND THE IMPORTANCE OF TAKING PERSONAL RESPONSIBILITY FOR THEIR HEALTH AND THE HEALTH OF THEIR BABIES...

- * AND TO MOTIVATE WOMEN TO TAKE ACTION TO PROTECT THEIR OWN HEALTH, TO OBTAIN REGULAR PRENATAL CARE, AND TO SEEK OTHER KINDS OF HELP WHEN THEY NEED IT.

THESE PURPOSES SOUND SIMPLE ENOUGH. BUT IN ORDER TO ACCOMPLISH THEM FOR THE "HEALTHY MOTHERS, HEALTHY BABIES" PROGRAM, WE HAVE TO KNOW A GREAT DEAL ABOUT ALL ASPECTS OF PREGNANCY AND BIRTH. AND WE ALSO WILL NEED A LOT OF DEDICATED, KNOWLEDGEABLE OUTSIDE HELP. AND THIS IS WHERE YOUR INVOLVEMENT AND THE INVOLVEMENT OF YOUR ENLIGHTENED EMPLOYERS IS SO IMPORTANT.

FOR THE SAKE OF WOMEN IN THE WORKFORCE -- AND FOR THE SAKE OF THEIR YET UNBORN CHILDREN -- WE NEED TO MOUNT STRONG, EFFECTIVE PROGRAMS TO COMBAT ALCOHOLISM AND SMOKING. THESE ARE TWO LEADING CAUSES OF MATERNAL ILLNESS, OF FETAL MALFORMATION AND FETAL DEATH, AND VERY LIKELY THE PREMATURE DEATH OF THE WOMAN HERSELF.

I FIRMLY BELIEVE, ALONG WITH EVERY OTHER RESPONSIBLE PUBLIC HEALTH OFFICIAL IN THIS COUNTRY, THAT SMOKING IS THE NATION'S NUMBER ONE PREVENTABLE CAUSE OF DEATH. THIS YEAR, WE ESTIMATE THAT SMOKING WILL

HAVE CAUSED SOME 340,000 PREVENTABLE DEATHS...DEATHS FROM LUNG CANCER, FROM CORONARY HEART DISEASE, AND FROM CARDIOVASCULAR DISEASE. IT IS A MAJOR CAUSE OF EMPHYSEMA, CHRONIC BRONCHITIS, AND ULCERS OF THE MOUTH AND OF THE GASTROINTESTINAL TRACT.

IN THE LATEST "SURGEON GENERAL'S REPORT ON SMOKING AND HEALTH," WE NOTE THAT THESE CONDITIONS ARE NOT LIMITED ONLY TO SMOKERS -- THEY ALSO OCCUR MORE FREQUENTLY AMONG PEOPLE WHO LIVE WITH OR WORK WITH SMOKERS. IN OTHER WORDS, THE INNOCENT, SO-CALLED "PASSIVE SMOKER" -- A CHILD, A SPOUSE, A FELLOW-WORKER, OR A CLOSE FRIEND OF SOMEONE WHO SMOKES -- IS ALSO AT A GREATER RISK THAN OTHER NON-SMOKERS FOR DEVELOPING CANCER, HEART DISEASE, BRONCHITIS, AND OTHER SMOKING-RELATED DISEASES.

THERE'S NO OTHER TERM FOR SMOKING THAN WHAT IT IS -- ONE OF SOCIETY'S MOST DANGEROUS EPIDEMICS. THEREFORE, WE HOPE THAT BY 1990 THE PROPORTION OF AMERICAN ADULTS WHO SMOKE WILL HAVE BEEN REDUCED DOWN TO LESS THAN 1 IN 4. IT IS NOW ABOUT 1 IN 3, WHICH IS MUCH TOO HIGH.

I KNOW THAT MANY COMPANIES PROVIDE SOME KIND OF SMOKING CESSATION HELP FOR THEIR WAGE AND SALARY EMPLOYEES. ALL I CAN SAY IS A VERY SINCERE "THANK YOU...AND KEEP UP THE GOOD WORK."

THE NEXT MOST DANGEROUS SUBSTANCE -- AND ANOTHER MAJOR, PREVENTABLE CAUSE OF DISEASE, DISABILITY, AND DEATH -- IS ALCOHOL.

NEARLY HALF OF ALL MOTOR VEHICLE FATALITIES -- ABOUT 24,000 A YEAR -- INVOLVE DRIVERS WITH BLOOD ALCOHOL LEVELS OF .10 PERCENT OR HIGHER. ANOTHER 40,000 AMERICANS WILL DIE THIS YEAR FROM CIRRHOSIS, FROM ALCOHOLISM, OR FROM ALCOHOLIC PSYCHOSIS. AND -- THE MOST TRAGIC CIRCUMSTANCE OF ALL -- NEARLY 2,000 BABIES WILL BE BORN THIS YEAR WITH BIRTH DEFECTS CAUSED BY THEIR MOTHER'S DRINKING DURING PREGNANCY. SOME OF THOSE CHILDREN WILL SURVIVE AND LIVE WITH THEIR DEFECTS OR WITH OTHER CONDITIONS CAUSED BY FETAL ALCOHOL SYNDROME. OTHERS WILL NOT SURVIVE AT ALL.

HERE AGAIN, I WANT TO ACKNOWLEDGE THE MANY EFFORTS BY BUSINESS AND INDUSTRY TO HELP THE AMERICAN PEOPLE WIN THIS BATTLE AGAINST THE ABUSE OF ALCOHOL. IN THIS, AS IN THEIR OTHER HEALTH PROMOTION EFFORTS, I

KNOW THAT THOSE COMPANIES HAVE A STRONG MOTIVE OF SELF-INTEREST. SMOKING...ALCOHOLISM...STRESS...INFECTIOUS DISEASE -- ALL THESE INTERFERE WITH THE PRODUCTIVITY OF OUR WORKFORCE. THEY CONTRIBUTE TO ABSENTEEISM, TO A LOWER QUALITY OF PRODUCT OR SERVICE, AND TO THE OVERALL INTEGRITY OF WHATEVER IT IS THAT THOSE COMPANIES ARE TRYING TO SELL.

SOME COMPANIES MAY BE MOTIVATED BY ALTRUISM AND A COMMITMENT TO PUBLIC CHARITY. COULD BE...BUT IF THEY ALSO FEEL THAT THESE PREVENTIVE ACTIVITIES CAN HELP THE PROFIT SIDE OF THEIR LEDGERS, I TOTALLY AGREE. I CAN ONLY ADD THIS ONE THOUGHT: IF SELF-INTEREST AMONG ALL AMERICANS FOR THEIR PERSONAL HEALTH WERE AS HIGH AS THE LEVEL OF CORPORATE SELF-INTEREST AMONG MANY HEALTH-CONSCIOUS BUSINESSES, OUR SOCIETY WOULD BE A LOT BETTER OFF, I CAN ASSURE YOU.

I THINK I INDICATED AT THE BEGINNING OF MY REMARKS THIS EVENING THAT THE TASK SET BEFORE YOU AS MESSENGERS OF HEALTH PROMOTION AND DISEASE PREVENTION IS NOT AN EASY TASK. THERE ARE MANY SIDES TO IT THAT IMPRESS US WITH THEIR SIGNIFICANCE, EVEN THOUGH WE DO NOT TOTALLY UNDERSTAND THEM OR CANNOT SEEM TO CONTROL THEM FOR THE GOOD OF

OURSELVES AND OUR NEIGHBORS. BUT THEN AGAIN, EACH OF US HAS EXPERIENCED IN OUR OWN LIVES A GOOD PORTION OF MYSTERY AND WE'VE MANAGED TO KEEP GOING FORWARD IN OUR HOMES AND CAREERS. SO I WOULD NOT BE DISCOURAGED. IT MAY EVEN BE A CAUSE FOR CELEBRATION.

I AM REMINDED OF A LITTLE QUOTE OF ALBERT EINSTEIN'S, A LITTLE SENTENCE OF HIS THAT NOT ONLY SUMS UP HIS VIEW OF HIS LIFE'S WORK -- BUT MAY SUM IT UP FOR EACH OF US AS WELL. HE SAID, "THE ETERNAL MYSTERY OF THE WORLD IS ITS COMPREHENSIBILITY."

ON THAT HOPEFUL NOTE, LET ME THANK YOU ONCE AGAIN FOR THE INVITATION TO JOIN YOU THIS EVENING AND LET ME WISH YOU EVERY SUCCESS IN YOUR FUTURE WORK, BRINGING TO YOUR FELLOW EMPLOYEES THE MESSAGE OF BETTER PERSONAL DECISION-MAKING FOR THEIR OWN GOOD HEALTH, THE HEALTH OF THEIR FAMILIES, AND OF THE GENERATIONS STILL TO COME.

THANK YOU.

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